

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET  
(FOR USE WITH FORM PTO-875)

SERIAL NO.  
101643681

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		
	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1							51
2							52
3							53
4							54
5							55
6							56
7							57
8							58
9							59
10							60
11							61
12							62
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26	/						76
27	/						77
28	/						78
29	/						79
30	/						80
31	/						81
32	/						82
33	/						83
34	/						84
35	/						85
36	/						86
37	/						87
38	/						88
39	/						89
40	/						90
41	/						91
42	/						92
43	/						93
44	/						94
45	/						95
46	/						96
47	/						97
48	/						98
49	/						99
50	/						100
TOTAL IND.			J		J		TOTAL IND. 3
TOTAL DEP.			J		J		TOTAL DEP. 43
TOTAL CLAIMS							TOTAL CLAIMS 46

PTO-1360 (3-78)

\*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

U.S. DEPARTMENT OF COMMERCE

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